

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS OFFEROR TO COMPLETE BLOCKS 12,17,23,24, & 30				1. REQUISITION NUMBER R117000007		PAGE 1 OF 1	
2. CONTRACT NUMBER C117000083		3. AWARD /EFFECTIVE DATE 04/05/00		4. ORDER NUMBER		5. SOLICITATION NUMBER RP117000007	
7. FOR SOLICITATION INFORMATION CALL:		a. NAME Sheila E. Jordan, Contract Specialist			b. TELEPHONE NUMBER (No Collect Calls) (304) 535-6285		6. SOLICITATION ISSUE DATE November 23, 1999
							8. OFFER DUE DATE 4:00 p.m. local prevailing time on December 17, 1999 and January 24, 2000
9. ISSUED BY National Park Service, Harpers Ferry Center, Office of Acquisition Management P.O. Box 50, Taylor Street Harpers Ferry, West Virginia 25425-0050		CODE		10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED <input type="checkbox"/> SET ASIDE: % FOR <input checked="" type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> SMALL DISAV. BUS. <input type="checkbox"/> 8(A) SIC: 7389 SIZE STANDARD: \$5.0 million average annual receipts		11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED <input type="checkbox"/> SEE SCHEDULE 13a. THIS CONTRACT IS A RATED <input type="checkbox"/> ORDER UNDER DPAS (15 CFR 700)	
						12. DISCOUNT TERMS	
13. DELIVER TO See Destination Points identified in Section D, Packing and Marking		CODE		16. ADMINISTERED BY		CODE	
17a. CONTRACTOR/ OFFEROR Winsor Graphics, LLC 312 Columbia Street, NW Olympia, WA 98501 Telephone Number 360-786-8200		CODE		18a. PAYMENT WILL BE MADE BY National Park Service, Harpers Ferry Center, Office of Programs and Budget, P.O. Box 50, Taylor Street, Harpers Ferry, West Virginia 25425-0050		CODE	
17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH <input type="checkbox"/> ADDRESS IN OFFER		18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM					
19. ITEM NUMBER	20. SCHEDULE OF SUPPLIES/SERVICES <i>Independently, and not as an agent of the Government, the Contractor shall provide all labor, materials, equipment and facilities (except as otherwise specified) necessary to provide exhibit quality porcelain enamel imaging on a variety of substrates intended for outdoor use. Other services related to the rehabilitation of porcelain enamel exhibits, including graphic layout, film mechanical preparation and final exhibit panel inspection and finishing are also a part of this contract.</i>			21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
				Minimum		\$ 30,000	\$ 30,000
				Maximum		\$400,000	\$400,000
				Minimum		\$ 30,000	\$ 30,000
				Maximum		\$400,000	\$400,000
				Minimum		\$ 30,000	\$ 30,000
				Maximum		\$400,000	\$400,000
25. ACCOUNTING AND APPROPRIATION DATA To be affixed to each Task Order						26. TOTAL AWARD AMOUNT (For Govt. use only)	
<input checked="" type="checkbox"/> 27a. Solicitation incorporates by reference FAR 52.212-1, 52.212-3, 52.212-4, and 52.212-5. <input checked="" type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED <input type="checkbox"/> 27b. Contract or Purchase Order incorporates by reference FAR 52.212-4 and 52.212-5. <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED							
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN <u>03</u> <input type="checkbox"/> TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.				29. AWARD OF CONTRACT: REFERENCE _____ OFFER <input checked="" type="checkbox"/> DATED _____. YOUR OFFER ON SOLICITATION (BLOCK 5) INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH.			
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER)			
30b. NAME AND TITLE OF SIGNER		30c. DATE SIGNED		31b. NAME OF CONTRACTING OFFICER JoAnne Grove Contracting Officer (NPS-HF-IVCA-1)		31c. DATE SIGNED 04/05/00	
32a. QUANTITY IN COLUMN 21 HAS BEEN <input type="checkbox"/> RECEIVED <input type="checkbox"/> INSPECTED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT, EXCEPT AS NOTED				33. SHIP NUMBER PARTIAL FINAL		34. VOUCHER NUMBER	
32b. SIGNATURE OF AUTHORIZED GOVT. REPRESENTATIVE				32c. DATE		35. AMOUNT VERIFIED CORRECT FOR	
				36. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		37. CHECK NUMBER	
				38. S/R ACCOUNT NUMBER		39. S/R VOUCHER NUMBER	
41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT				42a. RECEIVED BY (Print)			
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER		41c. DATE		42b. RECEIVED AT (Location)			
				42c. DATE REC'D (YY/MM/DD)		42d. TOTAL CONTAINERS	